PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)	Docket Number (Optional) 745691-35

In re Application of
Bernhard NELLESSEN, et al.

Application Number 10/521,795	Filed October 27, 2005

For **Method of Deinking**

Art Unit 1731	Examiner Dennis R. Cordray

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

		Fee	Small Entity Fee	
☐	One month (37 CFR 1.17(a)(1))	$120	$60	$_____
☐	Two month (37 CFR 1.17(a)(2))	$450	$225	$_____
☒	Three month (37 CFR 1.17(a)(3))	$1020	$510	$ 1020.00
☐	Four month (37 CFR 1.17(a)(4))	$1590	$795	$_____
☐	Five month (37 CFR 1.17(a)(5))	$2160	$1080	$_____

☐ Applicant claims small entity status. See 37 CFR 1.27.

☐ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Director has already been authorized to charge fees in this application to a Deposit Account.

☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 19-2380 (745691-35) . I have enclosed a duplicate copy of this sheet.

I am the ☐ applicant/inventor

    ☐ assignee of record of the entire interest. See 37 CFR 3.71.
        Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).

    ☒ attorney or agent of record. Registration No. 43,143

    ☐ attorney or agent under 37 CFR 1.34(a).
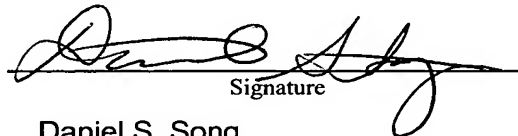   Registration number if acting under 37 CFR 1.34(a) _____.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

December 15, 2006	Signature
Date	
(202) 585-8000	Daniel S. Song
Telephone Number	Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of _____ forms are submitted.

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name	
Signature	Date

10225175.1